FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL								
OMB NUMBER:	3235-0076							
Expires:	April 30, 2008							
Estimated average	burden							
hours per response	16.00							

	SEC USE ONL	Y
Prefix		Serial
	1	1
	Date Received	
	1	1

Name of Offering (check if this is an amendment and name has changed, and indicate changed Series 2007 9% Debentures due December 31, 2010	ge.) - SE G
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) UNUDEROCESSING Section
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	JAN 2 8 2008
Name of Issuer (Check if this is an amendment and name has changed, and indicate change.) Cabot Properties Finance Capital, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) Cabot Finance Capital Advisors, LLC, c/o Cabot Investment Properties, LLC, 100 Summer Street, 23 rd Floor, Boston, MA 02110, Attn: Mr. Carlton P. Cabot	Telephone Number (Including A. Code) (617)-423-6776 101
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same as above	Telephone Number (Including Area Code) Same as above
assets and (ii) to make short-term mortgage loans and other loans to and ecompanies who may be sponsors and offerors of syndicated real estate interesting the syndicated real	quity investments in real estate rests, including its affiliates
	other (please specify): mited Liability Company
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS	DCESSED [D] [E] N 3 0 2008
Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Reg et seq. or 15 U.S.C. 77d(6)	10MSQNction 4(6), 17 CFR 230.501
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offer Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address after the date on which it is due, on the date it was mailed by United States registered or cer	ne address given below or, if received at that
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.6	C. 20549
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be resigned must be photocopies of the manually signed copy or bear typed or printed signatures.	nanually signed. Any copies not manually
Information Required: A new filing must contain all information requested. Amendments need only changes thereto, the information requested in Part C, and any material changes from the information and the Appendix need not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notic where sales are to be, or have been made. If a state requires the payment of a fee as a precondition of proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance.	te with the Securities Administrator in each state to the claim for the exemption, a fee in the

notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:

 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	Director	
Full Name (Last name first, if ind	ividual)				
Cabot Finance Capital Advisors, I	LLC				
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		
100 Summer Street, 23rd Floor, Bo	oston, MA 02110				
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Cabot Investment Properties, LLC	;				
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		
100 Summer Street, 23rd Floor, Bo	oston, MA 02110				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)	= :			
Cabot, Carlton P.					
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		
100 Summer Street, 23rd Floor, Bo	oston, MA 02110				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Kroll, Timothy J.					
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		
100 Summer Street, 23rd Floor, Bo	oston, MA 02110				
Check Box(es) that Apply:	Promoter	□ Beneficial Owner		□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Taussig, James					
Business or Residence Address	(Numbe	r and Street, City, State, Z	ip Code)	·	
100 Summer Street, 23rd Floor, Bo	oston, MA 02110				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Numbe	er and Street, City, State, Z	ip Code)		

				B. INF	ORMATI	ON ABOU	T OFFER	ING				
1. Has the iss	suer sold, or	does the iss	suer intend t	o sell, to no	on-accredi	ted investor	s in this off	fering?				V o ⊠
			Ans	wer also in	Appendix	, Column 2	, if filing ur	nder ULOE.				
2. What is th	e minimum	investment	that will be	accepted fr	om any in	dividual?					\$_50,00	00_
3. Does the o	B. Does the offering permit joint ownership of a single unit?											
a person to states, list	n or similar be listed in the name of lealer, your	r remunerati s an associa of the broker may set forth	on for solici ted person of or dealer. In the inform	tation of pure tagent of a life that the lif	irchasers i a broker o an five (5)	n connection r dealer reg) persons to	n with sale istered with be listed a	s of securiti	ies in the of and/or with	fering. If a state or		
Tun Name (E	ast name m	isi, ii ilidirii	.u.u.)									
Orchard Secu		11 01	1.00			N- 1- N						
Business or R	lesidence A	ddress (Nun	nber and Str	eet, City, S	tate, Zip C	.ode)						
150 W. Civic	Center Dri	ve, Suite 10	4, Salt Lake	City, UT 8	4070							
Name of Asso	ociated Bro	ker or Deale	r					2				
States in Whi												
*		r check indi									🔯 / [HI]	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	(CT)	[DE]	[DC]	[FL]	[GA]		[ID] [MO]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	• •
[MT]	[NE]	[NV]	[NH]	(M)	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	(PA)
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L.	ast name II	rst, ii inaivie	mai)									
OMNI Broke	 											
Business or R	lesidence A	ddress (Nun	nber and Str	eet, City, S	tate, Zip C	Code)						
10542 S. Jord	lan Gatewa	y, Suite 330,	Salt Lake (City, UT 84	095							
Name of Asso	ociated Bro	ker or Deale	ī							·		
William S. Tl	homas. Pad	ma Chintana	ılli. Robert V	Vonderharr	and Jeff B	Benson						
States in Whi	ch Person I	isted Has S	olicited or I	ntends to So	olicit Purc	hasers						
		r check indi		·								All States
[AL]	[AK]	[AZ⊠]	[AR]	[CA⊠]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN⊠]	[TX]	נעדן	(VT)	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indivi	dual)									
Direct Capita	I Securities	, Inc.										
Business or R	lesidence A	ddress (Nur	nber and Str	eet, City, S	tate, Zip C	Code)				•		
1333 2 nd Stree	et Suite 60	0 Santa Mo	nica CA 9	0401								
Name of Asso				0101		· · · · · · · · · · · · · · · · · · ·						
Robert Hornis States in Whi		isted Has S	olicited or I	ntends to S	olicit Purc	hacere				·		
		r check indi									🗆 /	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
IRII	(SC)	ISDI	(⊠NT)	[TX]	IUTI	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]

					B. IN	FORMAT	ION ABOU	T OFFERI	NG		_		
1. Ha	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No DZ	
							, Column 2	_				s 50,0	100
2. W	hat is t	he minim	ım investm	ent that w	ill be acce	oted from a	ny individ	ual?		•••••••	*************	\$	
3. Do	oes the	offering p	ermit joint	ownershi	p of a singl	e unit?						Yes ∑	No □
co If	mmiss a perso	ion or simi on to be list	lar remuner ed is an ass	ation for s ociated pe	olicitation rson or age	of purchase nt of a brok	ers in conne ter or deale	ction with r registered	sales of sec I with the S	curities in t EC and/or	irectly, any he offering. with a state		
			me of the bi							ciated pers	ons of such		
			irst, if indi						·				
	•	curities, li		,									
Busine	ss or R	Residence .	Address (N	umber and	Street, Ci	ty, State, Z	(ip Code						
			h Blvd., Su		akewood,	CO 80235							
	-		oker or Dea										
			Mike Rom		T I-	6 . 13 . 3 . 1	D -1						
			Listed Has										I 0
(C	heck "	All States	" or check i	individual	States)			••••	••••••	•••••••	••••••	☐ AI	l States
A	\L	AK	AZ	AR	G/A	CO	CT	DE	DC	FL	GA	[H]	ID
1	L	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	<u>IT</u>	NE	Ν̈́V	NH	NJ	NM	NY	NC	ND	OH	OK]	OR	PA
<u> </u>	RI	Se	SD	TN	[TX]	ÜT	VT	VA	WA	WV	[WI]	WY	PR
Full Na	ame (L	ast name f	irst, if indi	vidual)									
		alth Manag		,									
Busine	ss or l	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)						
			16, Fullerto		331								
		ociated Bro	oker or Dea	ler									
Mark I		oh Dorcon	Listed Has	Colinitad	on Intende	to Colinit I	Durahagara						
													l Ctataa
(C	Jneck "	All States	" or check i	naiviauai	States)					•••••••	******************	∐ Ai	l States
Α	\L	AK	AZ	AR	©A]	CO	CT	DE	DC	FL	GA	Ш	ID
	L	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	<u>AT</u>	NE	NV	NH	[N]	NM	NY	NC	ND	OH	<u>OK</u>	OR	PA
<u>L F</u>	RÍ	SC	SD	TN	TX	UŢ	VT	VA	WA	WV	[W]	WY	PR
Full N	ame (L	ast name f	irst, if indi	vidual)			<u> </u>						
D		Danistanaa	Add ()		1 Same at 1 C	en Cana 1	7:- (- 4-)						
Buşine	ess or i	Residence	Address (N	umber an	a Sireei, C	ity, State, 2	Zip Code)						
Name	of Asso	ociated Bro	oker or Dea	ler	<u> </u>								
States	in Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)							☐ AI	States				
[A								HI	ID				
_	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN								MN	MS	MO		
	/T	NE	NV	NH	NJ	NM.	NY	NC.	ND	OH	OK	OR	PA
	रा	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \[\] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$_10,000,000	\$_1,630,000
Equity	\$_0	\$ 0
☐ Common ☐ Preferred		
Convertible Securities (including warrants)	\$ <u>0</u>	\$_0
Partnership Interests	\$ <u>0</u>	\$ <u>0</u>
Other (Specify)	\$_0	\$_0
Total	\$ <u>10,000,000</u>	\$ <u>1,630,000</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchase on the total lines. Enter "0" if answer is "none" or "zero."	s Number Investors	Aggregate Dollar Amount of Purchases
Accredited investors	_19	\$ <u>1,630,000</u>
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)	NA	\$NA
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505	<u>NA</u>	\$_NA
Regulation A	NA	\$ NA
Rule 504	NA	\$_NA
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	NA	\$ <u>NA</u>
Transfer Agent's Fees	[s 0
Printing and Engraving Costs		\$ <u>0</u>
Legal Fees	_	
Accounting Fees	-	s 0
Engineering Fees		\$ 0
Sales Commissions (specify finders' fees separately)		S 900,000
Other Expenses (identify) Offering and Organizational Expenses, Origination Fee, Filing Fees		S 451,200
Total	_	\$ 1,351,200

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

I and total expenses furnished in response	offering price given in response to Part C - Question to Part C - Question 4.a. This difference is the ds to the issuer."	\$ 8,648,80	0
estimate and check the box to the left of the e	oss proceeds to the issuer used or proposed to be mount for any purpose is not known, furnish an stimate. The total of the payments listed must equal orth in response to Part C - Question 4.b above.	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		s _0	S 0
Purchase of real estate		□ \$ <u>0</u>	□ \$
Purchase, rental or leasing and installatio	n of machinery and equipment	□ \$ <u>0</u>	\$ 0
Construction or leasing of plant buildings	and facilities	□ \$ <u>0</u>	\$ 0
Acquisition of other businesses (includin offering that may be used in exchange fo	g the value of securities involved in this r the assets or securities of another	5 0	
•		□ \$ <u>0</u>	
• •			
			S \$ 8,648,800 □
Otner (specify):		□ \$ <u>0</u>	L 3 <u>V</u>
		□ \$ <u>0</u>	□ s _0
Column Totals		\$ 0	S \$ 8,648,800
Total Payments Listed (column totals add	led)	⋈ \$ 8,648,800	_
	D. FEDERAL SIGNATURE		
signature constitutes an undertaking by the is	ed by the undersigned duly authorized person. If this no suer to furnish to the U.S. Securities and Exchange Componencedited investor pursuant to paragraph (b)(2) of	mission, upon written	e 505, the following request of its staff,
Issuer (Print or Type)	Signature	Date	
Cabot Properties Finance Capital, LLC		Jan 7	, 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	!	
Timothy J. Kroll	Chief Operating Officer of Cabot Investment Propertie Capital Advisors, LLC, as manager of Cabot Properties	s, LLC, as manager of s Finance Capital, LLC	f Cabot Finance C

— ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE 1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions Yes No of such rule? □ ⊠

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Cabot Properties Finance Capital, LLC	In	Jan 7 ,2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Timothy J. Kroll	Chief Operating Officer of Cabot Investment Capital Advisors, LLC, as manager of Cabo	ent Properties, LLC, as manager of Cabot Finance of Properties Finance Capital, LLC

APPENDIX

ì	to non- investo	d to sell accredited ors in State B-Item 1	Type of security and aggregate offering price offered in state (Part C Item 1)		Type of in amount purc (Part C		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Series 2007 9% Debentures due December 31, 2010	Number of Accredited Investors	Amount*	Number of Non-Accredited Investors	Amount	Yes	No
AL			_						
AK									
ΑZ		Х	10,000,000	1	\$50,000	0	\$0	!	Х
AR								<u> </u>	
CA		Х	\$10,000,000	7	\$850,000	0	\$0		х
CO									
СТ									
DE									
DC									
FL									
GA									
HI									
ID									
IL									
ΙN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI		Х	\$10,000,000	5	\$300,000	0	0		х
MN									
MS									

APPENDIX

1	Intended to non-a	d to sell accredited rs in State 3-Item 1	Type of security and aggregate offering price offered in state (Part C Item 1)		Type of amount pu (Part		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	es No	Series 2007 9% Debentures due December 31, 2010	Number of Accredited Investors	Amount*	Number of Non-Accredited Investors	Amount	Yes	No
MO									
MT									
NE									
NV									
NH									
NJ									
NM									
NY		Х	\$10,000,000	1	\$25,000	0	\$0		Х
NC									
ND									
ОН									
OK									
OR									
PA									
RI									
SC		х	\$10,000,000	2	\$35,000	0	0		Х
SD									
TN		Х	\$10,000,000	3	\$370,000	0	0		Х
TX									
UT									
VT									
VA									
WA									
WV									
WI									

APPENDIX

I	Intended to non-actinvestors (Part B-	credited in State	3 Type of security and aggregate offering price offered in state (Part C Item 1)		amount pur	investor and chased in State C-Item 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Series 2007 9% Debentures due December 31, 2010	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
Foreign Juris- dictions										

